PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

09/24/2010 23598 7590

BOYLE FREDRICKSON S.C. 840 North Plankinton Avenue MILWAUKEE, WI 53203

Note: A certificate of mailing can only be used for stomestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name) Michael J. McGovern (Signature Filing Electronically (Date) October 13, 2010

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A	TTORNEY DOCKET NO.	CONFIRMATION NO.
10/591,196 TITLE OF INVENTION	10/01/2007 N: CRYSTAL OSCILLA	TOR SENSOR AND SU	Kazunari Shinbo BSTANCE ADSORPTION	DETECTION METI	1828.023 HOD USING THE SENS	5896 OR
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	12/27/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS			
LAPAGE, MICHAEL P		2886	356-445000	i v 118 Ur samme medicine		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The Address of the Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME A PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI Niigata Univ	less an assignee is identi th in 37 CFR 3.11. Comp GNEE	A TO BE PRINTED ON ified below, no assignee sletion of this form is NO	THE PATENT (print or typ data will appear on the pa yr a substitute for filing an a (B) RESIDENCE: (CITY Niigata, Japar	tent. If an assignee ssignment. and STATE OR COU	is identified below, the d	locument has been filed for
	iate assignee category or	categories (will not be p	rinted on the patent): 🔲	Individual 🗹 Corpo	oration or other private gr	oup entity 🔲 Government
4a. The following fee(s) Issue Fee Publication Fee (N Advance Order	Vo small entity discount p		b. Payment of Fee(s): (Plear A check is enclosed. Payment by credit card The Director is hereby overpayment, to Depos	. Form PTO-2038 is	attached.	

Typed or printed name Michael & McGovern This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

NOTE: The Issue Pec and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Frademark Office.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

Date October 13, 2010

Registration No. 28,326

Authorized Signature 7 11 4 14

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27